<i>*</i>	Effective October 1, 2003 10/809 2/4													
	· · · · · ·	CL	UMS A		FILED - PART I (Column 1) (Column 2)				SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS				37					RATE	FEE	٦	RATE	FEE	٦
FOR				NUMBER FILED		NUMBER EXTRA		1	BASIC FI	€ 385.00	OR	BASIC FE		,
TOTAL CHARGEABLE CLAIMS				クラ minus 20=		· 13		1	X\$ 9=	1117	OR	-		1
INDEPENDENT CLAIMS				minus 3 =		. 7			X43=	Ry	OR		 	1
MULTIPLE DEPENDENT CLAIM P				RESENT						104	1		 	┨
• 1	If the difference	e in colu	ımı 1 is	less than a	ero, enter	*0* in (column 2		+145=	+	OR			4
CLAIMS AS AMENDED - PART II									TOTAL	<u> </u>	JOR		<u> </u>	4
(Column 1) (Column 2) (Column 3)								L	SMALL	ENTITY	OR	SMALL	THAN ENTITY	1
AMENDMENT A		REM	AIMS AINING TER OMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	-
NON	Total	1.3	4	Minus	-3	}_	- 1		X\$ 9=	25	OR	X\$18=		1
AME	Independent	ENTATO	<u>ر</u> ۱۷ ۵۶ ۸۷	Minus	PENDENT.) C) ANA	· ()		X43=		OR	X86=		1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	·	1
11-17-05				,			L	TOTAL		OR.	TOTAL ADDIT, FEE		1	
	(Column 1)				(Colum		(Column 3)							1
MENDMENT B		REMA	UMS UNING TER OMENT		HIGHE NUMBI PREVIOL PAID FI	er Usly	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NO N	Total	1.3	3	Minus .	-3		<u> </u>		X\$ 9=	-	OR	X\$18=		l
-	Independent	• NTATIO	4 OE 141	Minus	SENDENT (<u> </u>	-		X43= ·	·	OR	X86=		1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+290=		1.
									TOTAL	<u> </u>	OR ,	TOTAL ODIT: FEE		
		(Cotur	no 1)					•	l					
		CLAI REMAI AFT AMEND	NING ER	·	HIGHES NUMBE PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	ŀ
	Total	•	1	Minus	••		-	Γ	X\$ 9=		OR	X\$18=		İ
	Independent	•		Minus	***	1	÷	上	X43=		. t	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											OR			
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+290=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE The "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3." ADDIT. FEE											•	TOTAL DOTT, FEE		
TI	he 'Highest Num	ber Provio	usty Paid	For" (Total or	Independent	is the h	ghest number	found	in the app	ropriate box	in colu	700 T		

Application or Docket Number